



San Luis Obispo County Health Agency

Notice of Privacy Practices

Effective September 23, 2013

Your Information. Your Rights. Our Responsibilities.

This describes how medical information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

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Your Rights *(Continued)*

Get a list of those with whom we've shared information

- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting the Health Agency Privacy Officer:
For Mental Health and Drug & Alcohol Services, please call **805-781-4748**.
For all other services at the Health Agency, please call **805-781-5500**.

Or send a letter to:

Privacy Officer
San Luis Obispo County Health Agency
2180 Johnson Avenue
San Luis Obispo, CA 93401

- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights:

Send a letter to:

Office of Civil Rights
90 7th Street, Suite 4-100
San Francisco, CA 94103

Or you can file a complaint online at:

www.hhs.gov/ocr/privacy/hipaa/complaints/

Or call: Voice Phone (800) 368-1019 ■ TDD (800) 537-7697

- You will not be punished or penalized for asking questions or for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

Note: *This section lists several of the ways in which healthcare providers may share your information; however, many do not apply to the practices of the San Luis Obispo County Health Agency.*

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a directory (*the Health Agency does not use a patient directory*)

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- Marketing purposes (*the Health Agency does not use your information for marketing*)
 - Sale of your information (*the Health Agency does not sell your information*)
 - Most sharing of psychotherapy notes
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In the case of fundraising

- We may contact you for fundraising efforts, but you can tell us not to contact you again (*the Health Agency will not contact you for any fundraising effort*)

Our Uses and Disclosures

We typically use or share your health information in the following ways.

Treat you

- We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

- We can use and share your health information to run our organization, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

- We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

- We can share health information about you for situations such as:
 - Preventing disease
 - Helping with product recalls
 - Reporting adverse reactions to medications
 - Reporting suspected abuse, neglect, or domestic violence
 - Preventing or reducing a serious threat to health or safety
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Do research

- We can use or share your information for health research.
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Comply with the law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
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Our Uses and Disclosures *(Continued)*

Respond to organ and tissue donation requests

- We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

- We can use or share health information about you:
 - For workers' compensation claims
 - For law enforcement purposes and officials
 - With health oversight agencies for activities authorized by law
 - For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For information about our responsibilities for this notice, see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

This notice applies to the following services within the San Luis Obispo County Health Agency:

- Mental Health Services
For more information, see: www.slocounty.ca.gov/health/mentalhealthservices
- Drug & Alcohol Services
For more information, see: www.slocounty.ca.gov/health/DAS_Home
- Public Health Services
For more information, see: www.slocounty.ca.gov/health/publichealth
- You may also ask about Health Agency programs and clinic locations by calling 805-781-5500.

Health information about services you may have received from our Mental Health or Drug and Alcohol programs is filed in an electronic health records system that is shared between the two programs. Staff members of these two programs are allowed limited access to your health information and only the minimum amount necessary to provide for your treatment, to receive payment for services, and to run the operations of our organization.

Changes to the Terms of this Notice

- We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.
- This notice is effective as of **September 23, 2013**.

For questions about this notice or for more information:

- Contact the Mental Health and Drug & Alcohol Services Privacy Officer at **805-781-4748**.
- For all other services at the Health Agency, contact the Privacy Officer at **805-781-5500**.
- Or send a letter to the Privacy Officer at:
San Luis Obispo County Health Agency
2180 Johnson Avenue
San Luis Obispo, CA 93401